



न्यु कौहिनुर हॉस्पिटल

मल्टीस्पेशलीटी एवं म्सोनोग्राफी केंद्र

असोरिया पेट्रोल पंप के पास, बलगांव रोड, अमरावती, मो. 9922286422



NAME: MEHAFUZA PARVEEN

AGE & SEX: 24 Y / F

DATE: 27/03/2025

REFERRED BY: DR. SUMAIYYA MAM

OBSTETRIC USG (ANOMALY SCAN)

LMP : 10/11/2025

GA : -----

EDD by LMP : 17/08/2025

GA by Biometry: 19 weeks 3 days

EDD by Biometry : 19/08/2025

Real time B-mode ultrasonography of gravid uterus done.

Route: Transabdominal.

Single intrauterine gestation seen.

Maternal-

Cervix measured 3.0 cm in length.

The internal os and cervical canal appear closed.

Fetus-

Presentation : Changing lie.
Placenta : Anterior (Grade-II).
Liquor : Adequate (Deepest pocket measuring 4.5 cm).
Umbilical cord : Three vessel cord seen.
Fetal activity : Fetal activity present.
Cardiac activity : Cardiac activity present. FHR- 149 bpm.

FETAL BIOMETRY:

Biparietal Diameter	44.7 mm	19 Weeks	4 Days
Head Circumference	169.8 mm	19 Weeks	4 Days
Abdominal Circumference	144.7 mm	19 Weeks	6 Days
Femur Length	31.5 mm	19 Weeks	6 Days

Average G.A. : 19 WEEKS 3 DAYS EDD : 19/08/2025
 E.F.W. : 311 +/- 46 gm.

Complete Diagnostic Solution

Subject to following condition : This Report is not valid for medico legal purposes. Serological test are known to give false positive or false negative result, so the final diagnosis conclusion should not be drawn from these test only. Advanced, Follow up Blood grouping and Rh typing remain subject to variation depending upon presence of inter fearing agglutination and Du. Variants in patient blood and various factors lab to lab variation should always be considerate. Subject to correction of typing/Printings and humanly mistakes.

Page 1 of 3

Fetal Anatomy:-

Head:

Midline falx and cavum septum pellucidum seen.
Both lateral ventricles appeared normal. Nuchal thickness is normal.
Posterior fossa appeared normal. Cerebellum and cisterna magna appear normal.
Choroid plexus appear normal. No identifiable intracranial lesion seen.

Neck:

No abnormal cystic mass is seen.

Face:

Fetal face seen in the coronal and profile views.
Both orbits, nose and mouth appeared normal.

Spine:

Entire spine visualized in longitudinal and transverse axis.
Vertebrae and spinal canal appeared normal. No e/o neural tube defect is seen.

Thorax and Basic cardiac study:

The heart is normal in position with normal situs.
Normal 4 chamber view and 3 vessel view appear normal.
LVOT and RVOT appear normal.
Fetal heart rate and rhythm are normal. Aortic arch is intact.
Both lungs are seen. No evidence of pleural or pericardial effusion.
No evidence of SOL in the thorax.

Abdomen:

Abdominal situs appeared normal. Stomach and bowel appeared normal.
Normal bowel pattern appropriate for the gestation seen.
No evidence of ascites. Anterior abdominal wall is intact.

Urinary Tract:

Both kidneys and bladder appeared normal.

Extremities:

All fetal long bones visualized and appear normal for the period of gestation.
Both feet appeared normal.

No obvious fetal anomaly is detected on this examination.

It must be however noted that detailed fetal anatomy may not be always visible due to technical difficulties related to fetal position and movements, amniotic fluid volume and maternal abdominal wall thickness. Therefore, all foetal anomalies may not be necessarily seen at every examination.



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Colour Doppler Study:

The utero-placental circulation was studied by sampling the uterine arteries bilaterally. They showed normal flow pattern, normal velocities and waveforms. No diastolic notch was seen on either side.

	P.I
Rt. Uterine Artery	1.03
Lt. Uterine Artery	0.99

IMPRESSION:

- Single live intrauterine gestation corresponding to a gestational age of 19 Weeks 3 Days.
- EDD by present Scan: 19/08/2025
- Presentation – Changing lie.
- Placenta – Anterior (Grade-II).
- Liquor – Adequate (Deepest pocket measuring 4.5 cm).
- Uterine arteries show normal colour Doppler study.
- Nasal bone appear marginally short in length measuring 4.0 mm.
- No e/o any other gross sonographically detectable anomaly noted in visualized parts of the fetus at present.

Basic fetal cardiac study done, for details fetal echocardiography suggested.
Kindly note small ASD/VSD may not be detected in antenatal scan.

Disclaimer:

Sugget: Cardiac Draft at 22-24 weeks

*Anomalies of small part like ears, fingers and toes cannot be detected routinely because of unfavorable position to visualize it.

*Minor cardiac defect like small VSDs, mild stenotic lesion, coronary artery anomalies and anomalies that evolve toward later gestation like aortic arch anomalies and those of pulmonary venous drainage may not be always identifiable antenatally.

DECLARATION:

I, DR CHETAN J. DAJJUKA, declare that while conducting ultrasonography scanning on this patient, I have neither detected nor disclosed the sex of her foetus to anybody in any manner.

Thanks with regards!

DR. CHETAN J. DAJJUKA
CONSULTANT RADIOLOGIST

Complete Diagnostic Solution DR. CHETAN J. DAJJUKA
Consultant Radiologist

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मेरा आधार, मेरी पहचान



भारत सरकार

Government of India



Mahefuja Farveen Zahiroddin

DOB : 11/04/1999

Female

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02/01/2012